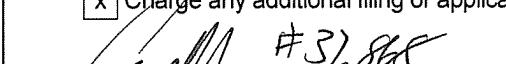


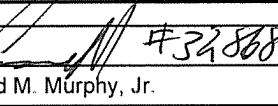
AMENDMENT TRANSMITTAL LETTER				Docket No. 4528-0109PUS2	
Application No. 10/516,741-Conf. #6986	Filing Date August 15, 2005	Examiner T. D. Wessendorf		Art Unit 1639	
Applicant(s): Thomas JESPERSEN et al.					
Invention: SCREENING METHODS					
MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
Total Claims	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
11	- 20 =	0	x 50.00	0.00	
Independent Claims	1	- 3 =	0	x 200.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month 120.00					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 120.00					
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>02-2448</u> in the amount of \$ <u>120.00</u> . A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Gerald M. Murphy, Jr. Attorney Reg. No.: 28,977					
Dated: <u>August 13, 2007</u>					
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000					

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i>		Complete if Known	
FEES TRANSMITTAL		Application Number	10/516,741-Conf. #6986
For FY 2007		Filing Date	August 15, 2005
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		First Named Inventor	Thomas JESPERSEN
TOTAL AMOUNT OF PAYMENT (\$ 120.00)		Examiner Name	T. D. Wessendorf
		Art Unit	1639
		Attorney Docket No.	4528-0109PUS2

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____					
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u>		Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch,</u>			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION																					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																					
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES																
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)														
Utility	300	150	500	250	200	100	_____														
Design	200	100	100	50	130	65	_____														
Plant	200	100	300	150	160	80	_____														
Reissue	300	150	500	250	600	300	_____														
Provisional	200	100	0	0	0	0	_____														
2. EXCESS CLAIM FEES																					
Fee Description																					
Each claim over 20 (including Reissues) Small Entity Fee (\$) Fee (\$) 50 25																					
Each independent claim over 3 (including Reissues) Small Entity Fee (\$) Fee (\$) 200 100																					
Multiple dependent claims Small Entity Fee (\$) Fee (\$) 360 180																					
<table border="1"> <tr> <td>Total Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> <td colspan="2">Multiple Dependent Claims</td> </tr> <tr> <td>11</td> <td>- 20 = 0</td> <td>x 50.00</td> <td>= 0.00</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> </tr> </table>								Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		11	- 20 = 0	x 50.00	= 0.00	Fee (\$)	Fee Paid (\$)		
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims																	
11	- 20 = 0	x 50.00	= 0.00	Fee (\$)	Fee Paid (\$)																
HP = highest number of total claims paid for, if greater than 20																					
<table border="1"> <tr> <td>Indep. Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> <td colspan="2">Fee (\$)</td> <td>Fee Paid (\$)</td> </tr> <tr> <td>1</td> <td>- 3 = 0</td> <td>x 200.00</td> <td>= 0.00</td> <td colspan="2">_____</td> <td>_____</td> </tr> </table>								Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)		Fee Paid (\$)	1	- 3 = 0	x 200.00	= 0.00	_____		_____
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)		Fee Paid (\$)															
1	- 3 = 0	x 200.00	= 0.00	_____		_____															
HP = highest number of independent claims paid for, if greater than 3																					
3. APPLICATION SIZE FEE																					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																					
<table border="1"> <tr> <td>Total Sheets</td> <td>Extra Sheets</td> <td>Number of each additional 50 or fraction thereof</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> </tr> <tr> <td>_____</td> <td>- 100 = _____</td> <td>/50 = _____ (round up to a whole number)</td> <td>x _____</td> <td>= _____</td> </tr> </table>								Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	_____	- 100 = _____	/50 = _____ (round up to a whole number)	x _____	= _____				
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)																	
_____	- 100 = _____	/50 = _____ (round up to a whole number)	x _____	= _____																	
4. OTHER FEE(S)																					
Non-English Specification, \$130 fee (no small entity discount)																					
Other (e.g., late filing surcharge): <u>1251 Extension for response within first month</u> <u>120.00</u>																					

SUBMITTED BY					
Signature			Registration No (Attorney/Agent)	28,977	Telephone (703) 205-8000
Name (Print/Type)	<u>Gerald M. Murphy, Jr.</u>		Date	<u>AUG 13 2007</u>	